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ABSTRACT

This learning module, which is part of a three-block series intended to help human service workers develop the skills necessary to solve the problems encountered in their daily contact with elderly clients of different cultural backgrounds, deals with communication and adjustment from the standpoint of the way in which French-speaking Canadians adjust to aging, disabilities, life settings, and death and dying. The first two sections discuss the importance of communication in old age and list the module's general objectives. The next section, which concentrates on communication practices that are common to French-speaking older Canadians, discusses language, leisure activities, travel, the practice of sitting in a rocking chair and talking, telephone, radio, television, attitudes toward the past, and gestures. Ways of life, habits, and impotence are examined in a section on the special ways in which French Canadian culture affects older adults' adjustment to disability. A section on adjustment to life setting includes materials on retirement, common retirement homes, itinerants, local situations, and attitudes (especially greed). The next section, which deals with concerns surrounding adaptation to death and dying, includes a discussion of death from the standpoint of French Canadian heritage. A list of selected readings and descriptions of six pertinent films are appended. (MN)

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BLOCK B
Cultural Gerontology

MODULE B.3.1
Communication and Adjustment

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COMMUNICATION AND ADJUSTMENT

MODULE B.3.1

The Elderly Service Workers' Training Project wishes to express appreciation of the following individuals who have contributed to the development of the "COMMUNICATION AND ADJUSTMENT" module.

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INTRODUCTION

In old age, communication becomes much more important since activity is diminished, and since, most of the time involvement with others is reduced.

In other words, the less activity there is, whatever it be, the more precious is the communication still possible; and the fewer human relations there are, the more indispensable is the communication that remains.

In our older adults, one can first distinguish two large categories: the people in good health, or able-bodied, and the sick or handicapped people. In the latter case, there is more or less a large relationship of dependence vis-a-vis others.

Fernand Seguin well defines what differentiates these two categories, and how one can pass from one to the other:

> Health is first and foremost independence. And one must see how people react, people who, having arrived at a certain age, are sick or victims of a more or less serious accident are hospitalized or have become more or less disabled. The first sufferance of these people is to no longer feel independent; they need others. They can no longer move about or feed themselves and they can no longer perform certain functions that they used to perform. In this sense, independence seems to me the most characteristic gauge of individual health. (Maurice Leveille, Mythes du monde moderne (Myths of the Modern World), Ed. Bellarmin, Montreal, 1986).

Another distinction that imposes itself on older adults is between those people (healthy or not) living in a family setting on one hand, and those who are detached, and who live in retirement homes or sanitariums on the other hand. It is all a question of life setting.

Finally, for everyone, comes the ultimate moment to consider - death. For the mystery of death, there is no answer but the mystery of life.

This is well depicted at the beginning of the film produced in collaboration with Dr. Henri Laborit and echoed in his works of anthropological medicine Mon oncle d'Amerique" (My American Uncle).

GENERAL OBJECTIVES

Upon completion of this module, with respect to the French Canadian older adult population you will be able to:

1. Describe several communication practices of French Canadian older adults.

2. Describe several concerns surrounding adjustment to disability.

3. Describe the concerns surrounding adjustment to life setting.

4. Describe several cultural concerns surrounding death and dying.

The following section will present several communication practices of French Canadian older adults.

COMMUNICATION PRACTICES

Upon completion of this section, you will be able to describe several communication practices of French Canadian older adults.

Language

Two basic rules are to be retained, in a minority context, (Manitoban in particular), that can seem paradoxical at first glance:

1) The older the person is, the more likely it is that she possesses French as a principal language.

2) The less a person has lived here, the more likely it is that she possesses French as a principal, if not only language.

A word of explanation:

1) It is well known that the phenomenon of assimilation - or acculturation - increases gradually as a minority population grows older. Without entering into considerations of the social or historical order, it suffices to remember that the Franco-Manitobans of second, third or fourth generation are much less conscious of their cultural identity than were their grandparents or their parents. For them, French as a

language of communication is something completely natural.

2) Incidentally, any person having grown up in a homogeneous francophone setting, in Canada or in Europe, is naturally inclined to use their maternal language, preferentially or exclusively. Thus we meet here people who hardly ever use English. It is evident that an official would be wasting his time in wanting to change this state of mind.

This is equally true in the case of people who are just passing through or visiting. A distressing incident occurred three or four years ago when a lady from Quebec on vacation was hospitalized at St. Boniface following an accident. She lost her life. She did not speak English, and her son wanted to initiate a lawsuit against the hospital, which he accused of being responsible in this affair, and who took for granted that this institution could offer its services in French. A hospital spokesman declared that there had been a misunderstanding; the case was settled amicably but it shows that the recognition of the language can have serious implications.[1]

[1] This telephone interview had been heard on the radio. The sister said there was a "translation service" available. I doubt that it is available 24 hours a day!! I know cases of patients who had to suffer doubly because the nurse gave orders that the patient did not understand!! And these nurses are not all Mother Theresa's. The interns are even less so.

The French Canadians have good relations with all the minority groups in general, much like they had good relations with the autochthons (indigenous population) at the time of the colonies. The frictions or differences are superficial - and inevitable, given the human nature.

In Manitoba, in view of the large ethnic diversity since the turn of the century, and the nearness of the founding people since the beginning, one cannot truly say that an antagonism (French - English) exists as in the Eastern provinces.

However, it remains that there is some sensitiveness to be careful of, and especially older adults who have solid French Canadian backgrounds that can be easily hurt, and therefore retort. Whether one likes it or not, many French Canadians retain the notion that they are "Canayens", as they say, and that they are as much rulers here in Manitoba as anywhere else in Canada. There is nothing to change in that.

They will not tolerate being told to speak another language in a public place; and they will not easily accept their name being written or pronounced in English, when spelling or usage demand otherwise.

Leisure Activities

It is well known that women in Canada and elsewhere, live to an older age than men, on average. The statisticians say "life expectancy", a metaphor for: longevity.

One of the factors appearing here is the occupation of time by older adults.

Men who have no hobbies, no pastimes, who are not

handymen, readers or crossword puzzle amateurs, bingo or golf enthusiasts, Sunday painters or antique collectors, fishermen or gardeners..., in a word, who have no secondary interest as a pastime, are to be pitied.

Women have more resources from this point of view. Cooking, and especially handiwork, such as knitting, quilting, and other, and decorative arts, furnish them with marvellous pastimes.

This was noted - well before one talked of stress - by the French philosopher Alain in his Propos.

In Manitoba, many francophone women of European origin show remarkable aptitudes in this sense. A Manitoban artist-painter, Bernard Mulaire, published an informing brochure, Objects faits a la main au Manitoba francais (Hand-Made Objects in French Manitoba) (Editions du Ble, St. Boniface, 1976). A statement of expositions held in the Franco-Manitoban Cultural Center since it has existed (1974) would show a range of works made by hand by older adults...

In the domain of leisure activities, one can never ignore that social clubs exist in most Franco-Manitoban communities, especially intended for older adults. These associations offer services and activities of great value, but they do not bring together all retired people, far from there. The people who are in most need of a human service worker are not found in these clubs.

Travel

Whoever has travelled by Greyhound bus might have observed that a good number of passengers are older

adults (mainly women), who have no need to travel for business or for meetings. They travel for the sake of travelling and to meet other people by chance. The bus, more so than the train, makes conversation almost inevitable; it is impossible to have a seat to oneself when the vehicle is about to be filled with people.

Individually or in a group, travel is one of the best amenities that can present itself to retired older adults...when health and means permit.

Travel is a dream that for a long time has been sustained by people whose active life did not permit them to think about it. Besides, more and more excursions are being organized exclusively especially for older adults, and one must believe that the deal is lucrative because it includes tours to the extremities of Canada and the United States, as well as in Europe and the Holy Lands.

Travel is one of the principal themes found in the work of the Manitoban novelist Gabrielle Roy. It inspired a story which was the object of a film by the NFB: Le Vieillard et l'enfant (The Old Man and the Child), where one sees a little girl from a town in southern Manitoba obtain permission from her mother to go see "the big Lake Winnipeg", by train with her older adult friend. A story which dates back to 1936...There were impossible crowds to contend with when this film

was first shown at the Main Cinema (picture-palace), in Winnipeg, some months ago.

It is not without interest to underline here that one of the types of French Canadians became not only famous but also mythical, in all of Canada and even the United States, is precisely the "Voyageur" or traveller, often with a capital "V". Naturally, this historic individual is considered as being rather young, or in the prime of life. It would be worthwhile to do a study on this historic "traveller" now aged or disabled. Some voracious elements are furnished for us on these tired heroes by Guillaume Charrette, in L'Espace de Louis Goulet (editions Bois-Brules, 1976), also in an English version Vanishing Spaces (Manitoba Metis Federation, 1980, translated by Ray Ellenwood), and by Georges Dugas in Un Voyageur des Pays d'En-haut (first edition in 1980, last re-edition, 1981, Plains edition, St. Boniface).

Actual case

An older female adult, who lived a short distance from the Canadian National transcontinental railway tracks, saw the train pass every evening at about the same time. She said: "It's the train for Montreal." She would have loved to take this train for years and years, but never had the means. Without a doubt this

train captured more imagination for her than realities, but this persistent vow, even at such an advanced age (more than 90 years) shows the importance that this trip assumed. This woman was a Manitoban of third or fourth generation at least, but maintained a sort of nostalgia for the country of her ancestors. This is very frequent in Manitoba.

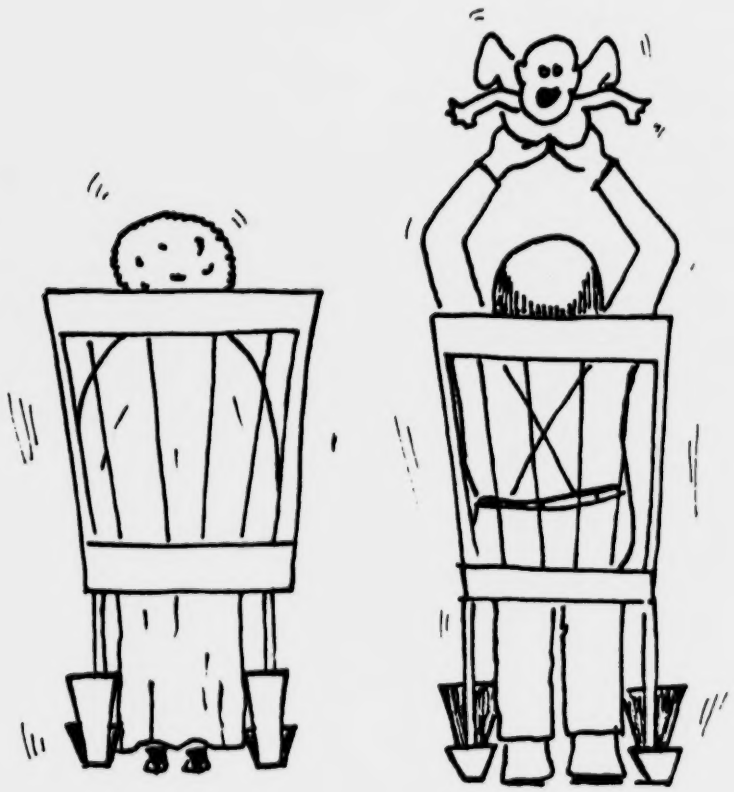
Curios (Curiosity-shop)

Certain people living alone accumulate objects and belongings for which they have no need, and gather so much that their dwelling resembles a museum, and their yard a "souk" (an Arab market). As such, they could bring upon themselves a formal statement of public grievance and mockery, but nothing will do. These people have an incoercible need to surround themselves with all sorts of things, and the best service to give them is to help them to organize things a little when they show the desire, or still yet help them to get rid of some of the things.

The Rocker

A traditional practice in French Canadian dwellings-homes is that of rocking. Thus, one could in effect carry out studies on the rocking chair (the art of producing it, its designs), and little if at all on the need and effects (physical and psychological), of

rocking. Only Romanesque literature permits one to organize a study on this custom, which still exists today. It should be respected and even encouraged because it obviously contributes to the well-being of the individual. Older adults are those who enjoy rocking the most, or at least to sit in a rocking chair.



Actual case

A middle aged man, a bit deficient mentally, lives poorly in a rented room. I "paid" him a visit. He was

forced to move because he accumulated too many things in his dwelling (clothes, bedding, papers, and so on) He was told that the condition of his room presented a fire hazard (although he does not smoke). The major piece of furniture in his room was a rocker in the center; he used it without respite, a bit like a baby who uses it's bottle. They allowed him to take all his tatters, but not the rocker. This type of chair is unobtainable today in furniture stores where chesterfields, upholstered couches, sofas and waterbeds abound. In handicraft boutiques or antique shops, a true rocker is an expensive item. An intelligent human service worker would have tried to allow the tenant to take his rocking chair first.

Telephone

In certain older adults who live alone or almost so and who are seldom interested in reading, the radio, television, or are incapable of becoming interested in these things, one can remark that the telephone becomes very important. The telephone can become their principal means of communication with the outside world. They can spend entire half-hours, even hours, conversing on the telephone.

For those who suffer from deafness, there are telephone devices that provide for amplification; they

only have to press a button on the receiver...and sense the life buoy!

For these people, the telephone is also the first recourse for the vital necessities: grocery orders, calls to the doctor, and so on.

Radio

Ever since the acquisition of local enterprises (four stations, in Manitoba, Saskatchewan and Alberta) by the Radio-Canada Society, French radio has lost much

of its presence throughout the years, to the point that a new movement is in progress in Manitoba to establish a community radio station. That is precisely what the French stations were in the early beginnings (with CKSB in the forefront): community radio stations.

Radio has gained in the cultural plan, but it is centered too much on Montreal and on stardom. Entire morning hours and afternoons are devoted to stars, especially from the entertainment world. Information, words and music which does not touch at all the majority of the local people here.

Prior to the reign of Radio-Canada, those hours were devoted to a variety of short broadcasts on a rotating basis from the national network to local programs and vice-versa, but always chosen in consideration of the audience and local interest. The longer local broadcasts were open to special requests, such as music, messages and listeners commentaries. It was above all, therefore, a principal means of communication. In addition, there were popular music programs transmitted live from the studio. On Sunday, there was a program that has existed for a long time which catered specifically to older adults and individuals who lived alone or that were disabled.

There have been developments in the domain of information, without a doubt, but programming lacks

coherence and especially local control. One is dealing with a bureaucratic hierarchy that excludes us.

Television

It is beyond doubt that television has greatly changed the life of isolated or immobilized people. I am thinking in particular of a severe paralytic (severe sclerosis attack) who has lived stretched out in bed for years on, and for whom television is the principal occupation. For certain unemployed workers who are not devoted to social activities and who have little interest in reading or the theater...television has become their indispensable occupation.

However, older adults who did not grow up with and lived with television only during their middle age, it is only a substitute. They are often left alone in front of the screen, like one would leave a child with a toy to amuse themselves.

Television becomes a valuable leisure time activity only if the older adults have good sight and good hearing, and only if they can appreciate what is being presented on the screen. Often these are only hazy images that have no sense for them and they would be better off sitting on the veranda or on the balcony, where they would have the chance at least to come in contact with someone in the neighbourhood, even if it is

only a cat or dog.

Television is essentially a distraction, not a companion. It cannot take the place of a companion. Many people fall asleep in front of the television. It is the best effect that it can produce for people who lack company.

Attitudes: Old Times

A very common attitude in older adults consists of magnifying and glorifying "old times" in relation to present times.

When were the olden days ? That depends on age, obviously. For some it would be the beginning of the century, and for others, the 1920's or 1930's.

The "olden days" are a sort of golden age of the collective memory. Maybe it has always been that way in other times and other places as well ...In any case, for our people, the olden days always assume something romantic and good, pleasing to evoke.

The olden days indicate hard but agreeable times when communication was not facilitated by technology, but in return, very authentic and personal.

Morals were much more strict and so were the families. There were much fewer conveniences and much more resourcefulness. People were less spoiled and more generous. Amusements were much simpler. In fact, all

of society was much simpler, and consequently, more beautiful.

Old times or "the good old days" being a continual reference for most older adults, the best thing to do in the face of this phenomenon is to try to understand the significance of the old days for them, and what they miss today in comparison.

Notes on Gestures

People have often noticed a tendency in French Canadians to make hand and arm gestures while talking - or even while not talking! This is not necessarily connected with a trait of Latin people. Our tendency to make gestures does not mean gesticulating, to explain or resolve questions as for the European French or Italians. It is much nearer to Indian manners. It indicates an escape towards something else. Distance, in the dimension of space - or the future or the past in the dimension of time. Or simply embarrassment, uncertainty, in a momentary situation. All vague notions, but very real.

The following section will present the concerns surrounding adjustment to disability.

ADJUSTMENT TO DISABILITY

Upon completion of this section, you will be able to describe several concerns surrounding adjustment to disability.

Actual Case Mr. C.

Mr. C. is a sexagenarian (an older adult), handicapped ever since an accident that he had several years ago. He limps. He lives very poorly counting solely on social security.

(I think he has a right to an invalid's pension. I accompanied him to a federal office to register a request, but he wanted a French-speaking person and they made him wait. He became impatient and we left empty handed...)

Mr. C. is not stupid nor backward, but he has a habit frequent in older adults, and particularly striking in him: that of repetition. (A psychologist may speak of it in terms of a "mental blockage").

"Change the record!" they say in a whimsical manner. He can repeat twenty times, even a hundred, the same judgement is passed on a person, or the same anecdote.

These people resume the same form of language, or express the same plans, day after day, month after month, year after year.

Examples of repetition...He has a grudge against the old landlord. "He's a thief. He's a millionaire, he'll steal your last cent. He goes to mass every Sunday. Not a bigger thief than that in Winnipeg!"

Or: "So-and-so; is a loafer, a bum, you understand? He's never worked in his life and will never work. Good at nothing or for nothing". Or of a woman: "She's a good for nothing." This could be repeated fifteen times or more in the space of an hour.

Someone who has known him for a long time told me that he had always repeated what I had heard from him many times: that he was going to travel to Quebec this summer. (He has not returned East for at least thirty years, and cannot travel alone, not even to the corner of Portage and Main St.)

This tendency to repeat oneself is probably not a trait exclusive to senility; it can touch all people at varying degrees, it seems. In any case, it is characteristic of an impoverishment, a lack of equilibrium, and what can one change about that?

Actual Case: Mr. D.

Mr. D. is a septuagenarian (an older adult) who suffers from arthritis in the legs, and has very poor sight. Thus, he can no longer go out.

A human service worker refuses to go visit him, allegedly because his room is too dirty.

He is deserted by his own people. He raised eight or nine children and several of his grandchildren could come and visit him, but it seems that the relations have deteriorated with time.

He refuses to go and live in a personal care home. He would not refuse help to put his room in order or to keep him company. But he has a very independent character, and he rebuffs in front of anyone who wants to blame him or challenge him hastily. He has already been reprimanded because his room was dirty and in complete disorder. He much prefers to live in the filth, independent, than to be submitted to insults.

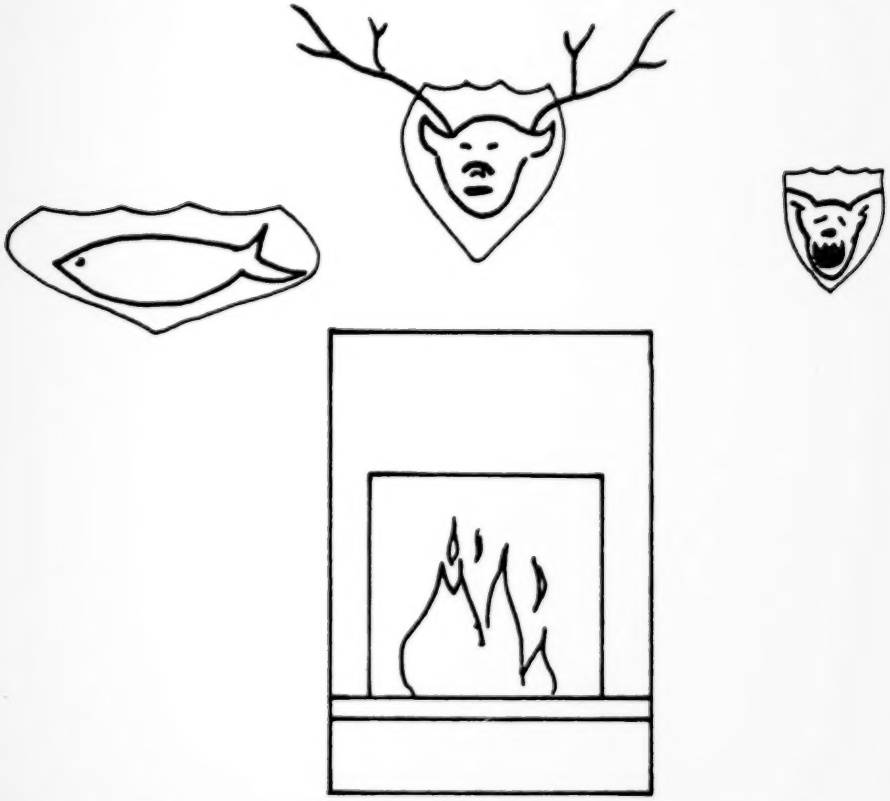
He smokes and throws his matches and butts into a waste basket beside his bed. But a complete stranger would take offense to such things and would surely show him the door.

He gets his provisions by telephone. At the head of the list: cheese, even if he still has some under the table (of Swiss origin). He leaves blocks of cheese under the table for days, weeks, even though he has a

refrigerator. If he is told that it gets mouldy, he answers that-the older cheese is, the better it is.

He looks very relaxed, but he does not sleep well. He sometimes thinks he hears unusual noises during the night. He leaves the light on all night. He says he has kept this habit since the death of his wife, whom he speaks of warmly. (However, according to gossip, he was not always affectionate with her, which would explain why he has little communication with his children...)

He practiced several professions, in the city and in the country. Before leaving the country, he did some ranching and some hunting. What hell it must be to stay 24 hours a day in a little room when one has been a fisherman and a hunter almost to the extent of the province!



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He loves stories about fishing and animals. His conversation is interesting and could easily form the material for a story or a chronicle of the life of people of his generation and his culture in Manitoba. His language is colourful. I would have liked to have more time to spend with him in order to write his memories, his ways of reacting, his judgements and his thoughts. (I had been his neighbour for some years).

In this case, there is a lack of communication, due firstly to the infirmity, but mostly to the character of the retired, and even more to the lack of know-how of human service workers and the lack of tolerance of his surroundings.

The human service worker must leave his norms, his tastes, his habits and his prejudices at the door when he arrives to assist a handicapped person or any person in need of public assistance. He must enter this person's world.

He must refrain from judging in a simple way, by categories, such as: "he's crazy", "he's a drunk", "he's a complainer", or still "she's a fool", "she's a scratcher", "she's a scrounger"...Or worse still, label the person considered as irretrievable: he has rheumatism, cancer, he's paranoid...

Of course every human service worker cannot be a Mother Theresa; but all workers destined to be in the

service profession must try to be human. Those are common places, but may prove to be disasterous situations in the relations between a person in need and a person given the task of making themself accessible and comforting.

The key to the attitude that the human service worker must adopt in treating the retired person, is to take him in his entire being, in his global situation, with his past, his character, his state of health, his pecuniary situation, his good and bad experiences and even, his expectations. This must be the approach of the nurse and the doctor with the invalid and the sick.

Actual Case Mr. F.

A very fat man (too fat), always smiling, apparently happy. But I learned after his suicide that he had health problems and was taking medication.

It is only then that I understood, somewhat, that he was suffering and that his smile was only a facade.

This man was not very communicative, and almost nothing was known about him or his environment, apart from his name.

He seemed to have enough money to live but he did not have an occupation and was completely unoccupied.

On a hot summer day he went to throw himself off a

bridge and his body was found a day or two later in the Red River.

The death notification of the deceased was printed in the paper, but the obituary description in the press never mentioned the word "suicide". It is only by acquaintances that I learned what had happened. He must have been high on drugs before his plunge.

Undoubtedly, a human service worker could have prevented this tragedy.

Ways of Life

Drinking and smoking are often the big criticisms that people make of older adults - especially men. Conversely, in the eyes of a psychologist, gossip and worldliness could probably be the countercriticisms found in women).

It is useless to attack these lifestyles. It's like putting the plough before the oxen. The bottle, and to a lesser degree, nicotinism are some of the consequences or effects of other problems, if there is a problem at all. One must try to find the source of the problem. However, these are not evils to be totally condemned, because these habits often allow the individual to live more comfortably, or even to very simply survive.

They are supports, of course, and economically,

"luxury products" not considered as indispensable and thus are strongly taxed and among the most expensive. To find a way to abolish these habits would be Utopia. To return again to sayings, "it is better to walk with crutches, than not to walk at all."

Other Habits

An unoccupied older adult is almost continually chewing. He is alert and does not lack good sense. However, one would say that he cannot stop chewing tobacco or gum...that's not the case: he has neither tobacco nor gum. The field of medicine or psychology may shed some light on this...whether this be a tic or a habit, this practice recalls exactly the chewing and the pondering of cattle.

This older adult is extremely isolated. One would say he lets himself go, like a hobo, with three month long hair and a week's beard. The first time I approached him, I noticed that his hands were very cold.

He has bitter remarks for that which could interest him (newspapers, television, and the like). He has what he needs materially to survive, but the surrounding world interests him very little. He always has a gesture of rejection when one speaks of an event or an activity. He has only pejorative words if one mentions the names of people who appear in the headlines. He is

not interested in what is happening.

Evidently, many activities have stopped in this man's life. But..., there is a "but". He has a small white dog who is devoted to him, and whom he loves. She did not think anything of me (not without having smelled my shoes), but as soon as she recognized him, she clambers on his knees, wagging her tail and licks his old fingers tarnished by tobacco. He strokes her, and hugs her and kisses her, and that can start all over again I don't know how many times.

The affection and the communication that he lacks in his daily life seems to be compensated by the company of this small animal. It is well known that small animals can be a comfort to

people who are retired and alone. One could also say that it is an essential component of French Canadian civilization.

Impotence

Impotence can attain a state of passivity which, does not necessarily demand medical intervention nor internment confined to an almost vegetative life, almost reduced to the elementary functions of the body. The mental faculties are still present, but sleep or drowsiness are predominant the major part of the time.

People in this state are called "vegetables" by anglophones, and "green plants" by the French, that is to say they are decorative!

The number of these people tends to be increasing, a view supported by medicine.

At the extreme, when the person becomes unconscious, a moral problem arises, much discussed today. Should one continue to maintain life artificially?

I have seen these cases at St. Boniface hospital and St. Boniface Home. The patient no longer recognizes people. He can survive like this for months, hooked up to machines and tubes. He could need a lot of care and, therefore, public expenses.

Human service workers are not obliged to speak

out on the moral question, obviously; they can only furnish a link between the hospital personnel and the sick, if they can still be of service to the latter.

Actual Case Mr. A.

A former civil servant who fulfilled a distinguished intellectual and artistic career became blind around 80 or 85 years of age.

He found means of compensation: his records permitted him to enjoy his favourite music; he got his grandchildren to read him articles and books. (Public libraries now possess cassettes specifically for these people.) In addition, he continued to write, despite being blind. He used capital block letters. In this way, he could let his pen create very readable stories and full of flavour.

For other people who do not have the same cultural level and have a less creative aptitude, verbal communication is obviously important...besides small daily satisfactions of eating, drinking , a pipe and the like.

Other Actual Cases

One type of communication that has been little studied but exists discreetly in every sphere, is that which is practiced between older adults and younger people who are "homosexually" oriented, and therefore

without fixed bonds.

("Homosexual" is put in quotation marks here because it is used only for want of a better word, since everyone is "sexual". It is used with caution - that a homosexual person is not considered as abnormal or having a mania, and does not fall under the stereotype which is sometimes caricatured in Cinema and in other media.)

A frequent case: one of the parents has become isolated, widowed or otherwise, and the only child left for them to occupy themselves with is single and remains so, having a "homosexual" nature. He could not have a better guardian.

The homosexual child (man or woman) will sacrifice his personal life, in a manner of speaking, out of loyalty to his father or mother. This child will be his or her support in their old age.

The "homosexual" is predisposed to this devotion and to this understanding, having had the experience of solitude and misunderstanding from his youth.

The "homosexual" can also contribute much, socially, to the retirees milieu (setting). Example: a middle aged chap, always rejected by his brothers and his father, regularly visits his older mother and took the initiative to coordinate reunions in a retirement home in Winnipeg. He succeeded marvellously. He knows

how to cook, has artistic talent, sings in Ukrainian and English as well as in French, knows the games society plays and possesses a sense of humour which is always appreciated.

That is only one case in a hundred. We can ask ourselves: haven't older adult organizations ever thought of establishing contacts with "gay" associations? It would surely be beneficial to both.

The following section will present the concerns surrounding adjustment to life setting.

ADJUSTMENT TO LIFE SETTING

Upon completion of this section, you will be able to describe the concerns surrounding adjustment to life setting.

Retirement

In Western societies, particularly in Canada, the increase in the number of older adults in proportion to the rest of the population cannot fail but have effects on the social security system .

Will old age pensions diminish? That is one of three answers considered in France where the problem is serious (there are nine million retirees). The other two, according to a recent analysis appearing in L'Express, would be: role back the retirement age, and a reduction of pension rates.

> "The golden age of retirement is well over", concluded the author, commenting on two reports from specialists on the occasion of the 40th anniversary of the social security system in that country. "The experts of the Plan announced to us very calmly, what could happen to us in about twenty years...At the end of twenty years in this system, an octogenarian in the year 2000 will receive half less than his equal today..." (Christine Delavennat, "La fin des retraites", L'Express, Oct. 11, 1985, p.32).

Even here in Manitoba, there are changes to forsee, because the burden of looking after these non-active people becomes too heavy.

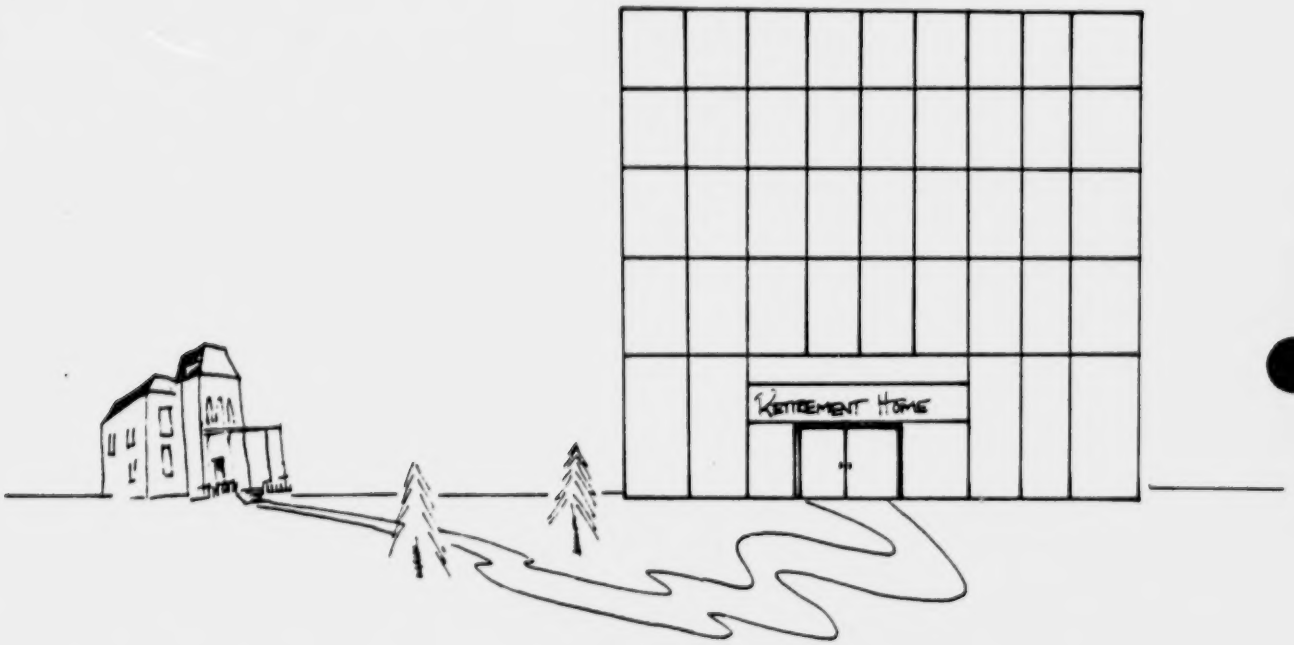
The provincial Minister of Health, Mr. Laurent Desjardins, touched on this point recently.

> "At the rate expenses are going, health will cost three times more in ten years. Laurent Desjardins does not mince matters: "If we continue at this rhythm, we will lose everything!"
>
> Everything, that is to say unquestionably one of the best health services in the world. ...Clearly, health has entered a period of transition in Manitoba. If the standards are to be maintained, inevitably changes must intervene.
>
> ...Essentially, the Committee (for the revision of health care) recommends developing community care (community clinics, home care). The goal of the maneuver: to keep people out of institutions as long as possible. The corollary: Medicine must center more and more around prevention education." (Bernard Bocquel, La Liberte, May 30, 1986).

Common Retirement Homes

For many, retirement homes most certainly can have several advantages: material security, organized leisure activities, appropriate food, new friends, and so on. In return, it is certain that for the majority of people excluded from a natural setting where every age coexists, it is an insertion into an artificial society, whose members are more or less nameless and deprived of the richness of the exchange of affection, of services and of acquaintances between generations and with society in general.

For an older adult couple, or for a person that is alone, separated or single, the single act of leaving a house in the neighbourhood or village to move into a large local block can be traumatic.



I knew a St. Boniface couple in this case, and meeting the man some time later, I found him changed and depressed. (His wife had the chance to work again and to frequent womens circles'.) In this same modern building, one can notice many deaths occurring after the opening. One cannot come to hasty conclusions, but the fact is striking anyway.

The removal of grandparents who find themselves "parked" as they say, in common residences with people of the same generation, struck the French Canadian society more than any other, perhaps.

This tendency is on a par with the decline in the birth-rate, evident for about two decades, and which greatly worries Quebec nationalists. (This decline seems, however, less sharp in minority settings, like in Western Canada, as opposed to Quebec.)

The exclusion of grandparents, on one hand, and the fall in the birth-rate, on the other hand , have a tragic relationship on a strictly human plane.

Traditionally, grandparents enjoy a role in the education of young children, in the care or the tending of these children, all this nourished by a mutual affection. Today, grandparents excluded from every family setting are deprived of these functions that are so useful to both parties. People who did not know any grandparents in their younger years will never know what they missed. In the reverse, grandparents cut off from the presence of youth maintain so many more sentiments of frustration and uselessness.

(One reports that in China today, they cultivate that union of generations; older adults tend the children, there is at least an economic advantage evident.)

The traditional French Canadian family was not only without generation gaps, but also composite, open to the whole clan. It was a family hive, which all French Canadian civilization witnesses: the house with its very large common room (the kitchen) furnished with a large stove and a draw-table (lengthening or

extending table), and including rooms with two or three beds under the roof; food, comprised of making weekly domestic bread in large batches, immense cauldronfuls of pork and beans or "cipate", vegetables in summer, preserved in great quantities in the fall, slaughters in winter at the homes of the farmers...; organization and the sharing of work, where older adults participate as much as the children, with prescribed tasks; reunions of family and relations, on the occasion of big religious holidays, civil holidays or birthdays in the family; the music and dances of the group, where an unlimited number of participants could enter; popular songs or folk songs, very often extolling (praising) grandparents, or uncles, aunts, cousins, sometimes in a touching way , sometimes in an amusing or ironic way...

It is not without nostalgia, therefore, that the older adults detached from the clan live between four walls which separate them from others who are like them! Happy if they keep contact with some members of the family or some loyal friends from the outside.

The esteem and the worship in which the family had been held also had its negative aspects, since the single person - outside of religious life - was considered as marginal and easily ridiculed. The expressions "old boy" and especially "old girl", even today, do not have a flattering flavour. Having arrived at an advanced age, these people can display a closed-uncommunicative and sensitive/touchy character or strange dispositions. It is important to take into account some antecedents (previous history).

The human service worker being obliged to deal with older

adults living in personal care homes will easily see the oppression felt by these people. He will even be of great service, occupying himself with their errands, inquiring about their needs, furnishing them with information, or even just visiting and listening to them. He will see that they are extremely sensitive to consideration, and they are ready to display their gratitude for small favours. (The human service worker might be tempted to take advantage of this.)

Among the retirees, there are a certain number who choose to live alone, so long as they are capable of getting by, and even to the end, if possible.

In this regard, diverse services from the Minister of Health are very useful when they are applied conscientiously, as well as certain religious community services, like the Youville Foundation, the Grey Nuns for the St. Boniface and St. Vital sectors.

However, in certain cases, the retirees are not reached by these services, and sometimes do not even know they exist!

Chance Comers

The fact that one finds in Western Canada, among the retirees or inactive French Canadians, an uprooted type who had been, in his active life, a migrant and an itinerant (a traveller), must be taken into account.

It is generally the natives of Quebec or of New Brunswick who have left their family in their youth and have since led a more or less adventurous life. They have shaken the dust off their boots once and for all. They could have lived in concubinage (cohabiting of man and woman not legally married) and could have changed their name as well as their job.

This type exists in the provincial setting even of Quebec; it has been well described in the novel Le Survenant by Germaine Guevremont (the first edition dating from 1945), which inspired in turn, a radio serial (story) of the same name which was very popular in a certain time period.

One finds in the western towns, and particularly in Winnipeg, these people without ties, who have arrived at retirement age or who have become invalids. They have kept their memories of youth and their language, and when one can identify with them as French Canadian, communication is spontaneous.

Local Situation

Found in the St. Boniface sector, in a radius of about one thousand, is a general hospital (the second largest hospital in the province), a geriatric hospital (the largest of its type in Manitoba), a nursing - care home (St. Boniface Home), six large retirement homes, three of which are specifically French Canadian (Chez-Nous, Accueil Colombien and Foyer Vincent), without mentioning private nursing homes. In addition, three religious communities have their head offices there (1) Soeurs Grises, (2) Missionnaires Oblates, and (3) Soeurs des Saints-Noms, where their members who have worked a little everywhere in Canada or in the world and are retired, reside.

There are also community residences for men and secular clergy (Oblats, Peres Blancs, Marianistes, archeveche). All this forms an unusual ensemble of retirees or immobilized people, so that one could say, without irony, that "St. Boniface is a town where one

comes to die." Let's say, rather, so as not to be cynical, "a town where one comes to spend his last days."

This is literally true of numerous rural-folk, even other provinces, who come to retire at St. Boniface, because of, in particular, the conveniences of the town and especially the connections with kin or acquaintances they have there.

Actual Case: Mrs. R.

A single woman, sprung from a rather poor family, approaching 90.

She suffers from discomfort but is still very lucid (rational), and even vigorous enough to take long summer walks.

After having lived in a boarding-house in the country, kept by nuns, she was placed in a nursing-care home in St. Boniface. She would have liked a non-hospital (non-institutionalized) residence; she applied to l'Accueil Colombien but she said it was too expensive for her.

She was surrounded by invalids and mentally deficient people. The rules of the house displease her, as well as the food, too heavy for her taste, and the design of the building, which is an old convent. The atmosphere is depressing for her.

She no longer has close relatives, few active leisure time activities, no one in whom she can confide, and is very unhappy, even if she is very believing.

It seems that this person is a victim, not only of poverty, but also of misunderstanding on the part of those responsible for the running of the institution. A relationship with a human service worker (man or woman) would be recommended, on the condition, of course, that he or she be francophone, informed on all the available services and capable of establishing a true communication.

Attitudes...Greediness

Amongst the older adults that I have had the chance to know, eating is very important. They have particular tastes and repulsions (dislikes) as well. This is a big problem, not only in aging homes but also in private homes. Only family members or near relations can know what pleases or displeases the person, how to serve the plate or bowl, at which moment, and so on. One believes in the virtues of pepper or even garlic, another cannot stand fat or sugar.

The very old adults have their favourite dishes, and it seems that no matter what is presented it is either already cooked, or in liquid (soup, broth, cream, and so on) that appears is of a pleasing nature to them,

likewise for pies and soaked bread, roast, bread spread with butter or jam rather than dry bread. Often, poor teeth and the lax performance of their digestive system makes food moist, requiring little chewing and is prefered.

Certain traditional preparations are always favourites, such as crepes and flour of wheat for breakfast, and for the more substantial meals, pea soup, pork and beans, meat pie or other pie-dishes, potted mince of pork and others.

People subject to a diet are not always capable of conforming to it. Sometimes even, prohibition can have an opposite effect. An older adult (septuagenarian) whom the doctor prohibited from having salt, keeps a salt shaker in his pocket and pours salt on the back of his hand to enjoy when he is tempted by it!

The following section will present several cultural concerns surrounding death and dying.

CONCERNS SURROUNDING ADAPTATION TO DEATH AND DYING

Upon completion of this section, you will be able to describe several cultural concerns surrounding death and dying.

Adaptation to Death

There really isn't any adaptation to death, as such. One does not adapt to the unknown.

One can talk about two attitudes (and without a doubt, they are not unique to French Canadians). Resignation (submissiveness) and relief. The two can be found in the same person, one being more pronounced or less pronounced than the other.

What is generally most striking in men is helplessness, where the attitude of resignation originates; and for women, isolation, from where the preponderant (predominating) attitude of relief stems.

It seems that women have a more marked religious or mystical sense in their attitude towards death. It is one of the points highlighted in the answers to a questionnaire of a very personal nature, which 125 francophone women from Manitoba answered in 1984.

(Interviews published by Janick Belleau, author of the questionaire[1]. Editor: CEFCO, St. Boniface, 1985). The investigator found that most of the women consider death as a "transition", a passage to another life.

In any case, it is important to communicate with the dying, for the good of the individual and others.

Actual Case (A)

A very cultured intellectual and musician, widowed for a long time, became impotent (helpless), had to

[1] Title: Le Manitoba des femmes repond.

leave his home to spend his last days at his daughter's home. He had suffered a lot physically but also morally, because his son had not been as good to him as his daughter, had not taken into account his desires, although the son was the first to arrange his inheritance! His biggest suffering was undoubtedly with the deprivation of his intellectual and musical life, the incomprehension of his son, and the consequences of his separation from a part of his descendants. This man (the son) does not know what he was deprived of, nor what he deprived his own children of.

Actual Case (B)

A woman struck by advanced cancer, widowed, mother of one son. Very religious, she conversed with a priest, who in turn met with the son. The latter does not occupy himself at all with the household affairs, is anti-religious, opposed to traditional values and has a tendency to alcoholism. At the death of his mother, he had a big religious service, and a little later, entered A.A. (alcoholics anonymous). He proceeded with the sale of the inherited goods, could make certain investments, and in addition, undertook medical studies. There was a total change in his life.

Facing Death:From a Heritage Point of View

For people who have children, the great peace is in the prolongation of their life in these children, and

their worry, in their well-being.

For people who have no direct descendants, they can have comfort in the presence of adopted children, or in the help provided by brothers, sisters, or other close members of the close family, and who will sustain their memory.

Of course, one excludes here monks, priests and nuns, who by definition, chose celibacy, and find great comfort in the work that they could do for others in society.

As for single laypeople, or people having had liasons but are leaving no descendants, it is important for them to leave a heritage in another form, involving some creativity: crafts, artistic, literary, scientific, or relating to a profession or a productive occupation. If there is no carnal, spiritual or creative prolongation of some type, then the person near death can put his trust in accumulated material possessions, either in the hope of leaving them in donation or as a legacy, or just for personal passion. It is the classic case of "l'avare" (the miser), in French Canada, who is nicknamed "Seraphin" or "Seraphin Poudrier", the character immortalized by Dr. Claude-Henri Grignon, and who was popularized by the radio series Un homme et son peche (A Man and His Sin), known by a generation at least, towards the middle of the

century; a character who had been stigmatized three centuries before in French literature by Moliere in L'Avare (the miser).

For people - with or without descendants - who have the feeling of having had interesting experiences, or of having witnessed memorable events, the story of past life could be a consolation in their old age, whether it be written or oral. French Canadians who knew very different times than today like to record their memories, if they have a "knack" for writing, or for relating in detail their memories. This can produce masterpieces, sometimes, and can greatly contribute to historic knowledge. In any case, even if those writings are called to stay in attics and reels to be thrown in the immense dust-bins of Radio-Canada, it is an activity to encourage. The recordings of certain radio interviews broadcast in the course of 50 years in Manitoba, become undiscoverable, gives an example of the value that this heritage can have (in particular the series "Autour de nos cloches" (Around Our Steeples). Another example is the chronology (history) of an older adult who is related to Marcien Ferland and edited by him, as well as published in a local weekly publication (La Liberte) in 1985-86.

SUMMATION

These notes on older retired adults in French Manitoba are a bit brief. A study of this type could be elaborated in propitious (more favorable) circumstances.

Several steps could be considered, following one or another of the disciplines or the human sciences one would like to adopt, or taking everything into consideration and simply taking a humanitarian point of view.

APPENDIX

Selected Readings

Ares, Richard. (1972). Qui fera l'avenir des Minorites francophones au Canada? conference donnee en septembre 1972, La Societe historique de St-Boniface, C.P. 125 Saint-Boniface (Manitoba) R2H 3B4.

Auguste-Henri de Tremaudan. (undated). Histoire de la nation metisse dans l'Ouest canadien Editions des Plaines, C.P.123, Saint-Boniface (Manitoba) R2H 3B4.

Beauchamp, Andre et. al. (1971). Vivre Son Age Les Editions Fides, 245 Est, Boulevard Dorchester, Montreal, Quebec, Canada.

Bonin, Marie. (1979). La Pastorale des malades d'hier et d'aujourd'hui conference donnee en fevrier 1979, La Societe historique de St-Boniface, C.P. 125 Saint-Boniface (Manitoba) R2H 3B4.

Champagne, d'Eschambault et Picton. (1971). Petite histoire du Voyageur, La Societe historique de St-Boniface, C.P. 125 Saint-Boniface (Manitoba) R2H 3B4.

Charette, Guillaume. (1980). Vanishing Spaces, Manitoba Metis Federation, translated by Ray Ellenwood. French edition, L'Espace de Louis Goulet 1st published in 1976.

Colin, Marcel. (1984). Au detour du chemin Editions Mille Roches, C.P. 323, Saint-Jean-sur-Richelieu, J3B 6Z5.

de Ravinel, Hubert. (1972). Vieillir au Quebec Les Messageries Internationales Du Livre Inc., 4550, rue Hochelaga, Montreal 404, Que.

Dorge, Lionel. (1976). Le Manitoba, reflets d'un passe Les Editions du ble, septembre 1982, boite postale 31 Saint-Boniface (Manitoba) R24 3B4.

Dugas, Georges. (1981). Un voyageur des pays d'En-haut First edition in 1890, a Plaines publication, St-Boniface, Manitoba.

Ferland, Marcien. (1980). Chansons a repondre du Manitoba Les Editions du ble, septembre 1982, boite postale 31 Saint-Boniface (Manitoba) R2H 3B4.

Gagne, Walker Emilienne. (1974). La Cuisine de mes grand meres:Recettes D'Autrefois Ottawa, Canada par les Grandes Editions du Quebec, 3555, rue Monselet, Montreal, Montreal-Nord, Quebec, Canada.

Selected Readings Continued

G.F.G. Stanley. (1971). Louis Riel conference donnee en fevrier 1970, La Societe historique de St-Boniface, C.P. 125 Saint-Boniface (Manitoba) R2H 3B4.

Guevremont, Germaine. (1945). Le Survenant

Introduction a l'etude des Franco-Manitobains, essai historiques et bibliographique. (1973). La Societe historique de St-Boniface, C.P. 125 Saint-Boniface (Manitoba) R2H 3B4

Kiraly, Marguerite. (1980). Avec Le Temps Editions Paulines, 3965 est, boul. Henri-Bourassa, Montreal, Que. H1H 1L1

Leveille, Maurice. (1986). Mythes du monde moderne ed. Bellarmin, Montreal.

MacEwan, Grant. (undated). French in the West Les Franco-Canadiens dans l'Ouest Editions des Plaines, C.P.123, Saint-Boniface (Manitoba) R2H 3B4.

Nos Chansons ou Le Manitoba Chante Encore... (1983). Un projet de la Federation des Aines Franco-Manitobains Inc.

Parent, Adrienne. (1981). Vieillir C'est Revivre Les Editions Domino Ltee. (Division de Sogides Ltee) 955, rue Amherst, Montreal, Quebec, H2L 3K4.

Parenteau, Arsene J. (1981). Le chemin de mes souvenirs Les Editions Beaudry & Frappier.

Parizeau, Jean. (undated). Les contes de mon patelin Editions des Plaines, C.P. 123, Saint-Boniface (Manitoba) R2H 3B4.

Precis sur le vieillissement au Manitoba (1985). A l' occasion de la Quatrieme conference manitobaine sur le vieillissement 21 au 24 mai 1985, Winnipeg, Manitoba.

Riel, "David" Louis. (undated). Poesies religieuses et politiques Editions des Plaines, C.P. 123, Saint-Boniface, (Manitoba) R2H 3B4.

Additional Resources

Place: National Film Board of Canada
245 Main St.
Winnipeg, Manitoba, R3C 1A7

Two Dreams of a Nation:The Fortin Family of Quebec and Alberta (Deux reves d'une nation)

It's the story of two generations and two branches of the Fortin family of Lac St-Jean, Quebec. One branch went west to the Peace River area of Alberta to found a French-speaking Catholic community in 1953. They reminisce about the early years without water or electricity in the style of the old-time pioneers. The other branch remained and evolved with a changing Quebec. It is a story of two dreams of the French-Canadian nation as represented by the members of one family.

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28 minutes:42 seconds 106C 0180 096

Making Our Way (Chemin faisant)

French-speaking Newfoundlanders settled on this rocky outpost some 250 years ago. They have always faced a double battle:against the elements and against assimilation into the English-speaking majority. Their language and traditions have been handed down from father to son. This is their story filmed in their surroundings. An English version of the French original.

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27 minutes:52 seconds 106C 0181 079

Additional Resources Continued

Place: National Film Board of Canada Cont'd

I Must Have a Name (J'ai besoin d'un nom)

This film documents the struggles and aspirations of the Franco-Ontarions. Time has weakened the energies of this minority. The film suggests that they lack a strong leadership backed by an organization prepared to take action. Will they survive culturally and linguistically? Of special interest to anyone concerned about francophone minorities outside Quebec.

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55 minutes:9 seconds 106C 0178 332

Bonjour Goodbye

In the town of Gravelbourg, Saskatchewan, a small pocket of French-speaking Canadians ("Fransaskois"), separated by thousands of kilometers from the French Canadian mainstream, is examining its own linguistic and cultural identity. The key questions they ask themselves are: "Do we face inevitable assimilation by the anglophone majority?" and, more significantly, "What will our future hold should Quebec opt out of Confederation?"

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28 minutes:50 seconds 106C 0178 287

Le Vieillard et L'Enfant

Travel is one of the principal themes found in the work of the Manitoban novelist Gabrielle Roy. It inspired a story which was the object of a film by the NFB: "Le vieillard et L'enfant" (The Old Man and the Child), where one sees a little girl from a town in southern Manitoba obtain permission from her mother to go see "the big Lake Winnipeg", by train with her older adult friend.

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51 minutes:17 seconds 106C 0285 057

Place: Parlimage (Specialise en Communication
et en animation par le film)
4572 Ave. De Lorimier,
Montreal, Quebec, H2H 2B5

The following is a collection of 16 mm films on older adult themes from the "Troisieme Age" series. Available from Parlimage, they are:

Albertine, L'Eternelle Jeunesse

Alice

Clara D'Amour et de Revolte

Comment Ca Va Les Jeunesses?

Les Dernieres Fiancailles

Les Fleurs Sauvages

Guitare

Les Traces D'Un Homme

Melodie Ma Grand-Mere

A film from the "Enfance Education" series. In short, it enables the viewer to examine relations between children and their grand parents.

---

24 minutes:40 seconds 16mm, color film

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ELDERLY SERVICE WORKERS' TRAINING PROJECT (ESWTP)

TITLES OF THE TRAINING PROJECT'S MODULES

Block A: Basic Knowledge of Aging Process

A.1 Program Planning for Older Adults **
A.2 Stereotypes of Aging **
A.3 Human Development Aspects of Aging **
A.4 Social Aspects of Aging **
A.5 Physiological Aspects of Aging **
A.6 Death and Bereavement **
A.7 Psychological Aspects of Aging **
A.8 Confusion and the Older Adult **
A.9 Nutrition and the Older Adult **
A.10 Listening and the Older Adult **

Block B: Cultural Gerontology

B.1 Ukrainian Culture **
B.1.1 Communication and Adjustment *
B.1.2 Communication and Adjustment *

B.2 German Culture **
B.2.1 Communication and Adjustment *

B.3 French Culture *
B.3.1 Communication and Adjustment *

B.4 Native Culture *
B.4.1 Communication and Adjustment *
B.4.2 Communication and Adjustment *

Block C: Work Environment

C.1 Work Environment I *

Resource Materials:

Handbook of Selected Case Studies
User's Guide
ESWTP Authoring System
ESWTP Final Report

Please Note:

ALL MODULES ARE AVAILABLE IN THE PRINT FORMAT. THE CODE FOR IDENTIFYING OTHER FORMATS IS LISTED BELOW.

Code	Format
*	Computer-Assisted Instruction (CAI) Courseware
**	Interactive Video (Tape)/Computer-Assisted Television Courseware